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|---|--------------|--------------------------|----------------------|
| <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2011</h3> |              | <b>Complete if Known</b> |                      |
|   |              | Application Number       | 10/578,380           |
|   |              | Filing Date              | 01/22/2007           |
|   |              | First Named Inventor     | Hasunuma             |
|   |              | Examiner Name            | Richard V. Muralidar |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27      |              | Art Unit                 | 2858                 |
| TOTAL AMOUNT OF PAYMENT   | (\$) 1110.00 | Attorney Docket No.      | YH0018-US1           |

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| <b>METHOD OF PAYMENT</b> (check all that apply)  |  |
| <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____   |  |
| <input checked="" type="checkbox"/> Deposit Account           Deposit Account Number: <u>18-0560</u> Deposit Account Name: <u>Tyco Electronics Corporation</u><br>For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) |  |
| <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, <b>except for the filing fee</b>   |  |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments   |  |
| <b>WARNING:</b> Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.  |  |

|   |                    |                     |                    |   |                         |                                  |                       |
|---|--------------------|---------------------|--------------------|---|-------------------------|----------------------------------|-----------------------|
| <b>FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)</b>   |                    |                     |                    |   |                         |                                  |                       |
| <b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>  |                    |                     |                    |   |                         |                                  |                       |
|   | <b>FILING FEES</b> |                     | <b>SEARCH FEES</b> |   | <b>EXAMINATION FEES</b> |                                  |                       |
|   |                    | <b>Small Entity</b> |                    | <b>Small Entity</b>                                     |                         | <b>Small Entity</b>              |                       |
| <b>Application Type</b>   | <b>Fee (\$)</b>    | <b>Fee (\$)</b>     | <b>Fee (\$)</b>    | <b>Fee (\$)</b>   | <b>Fee (\$)</b>         | <b>Fee (\$)</b>                  | <b>Fees Paid (\$)</b> |
| Utility   | 330                | 165                 | 540                | 270   | 220                     | 110                              | _____                 |
| Design  | 220                | 110                 | 100                | 50  | 140                     | 70                               | _____                 |
| Plant   | 220                | 110                 | 330                | 165   | 170                     | 85                               | _____                 |
| Reissue   | 330                | 165                 | 540                | 270   | 650                     | 325                              | _____                 |
| Provisional   | 220                | 110                 | 0                  | 0   | 0                       | 0                                | _____                 |
| <b>2. EXCESS CLAIM FEES</b>   |                    |                     |                    |   |                         |                                  |                       |
|   |                    |                     |                    |   |                         | <b>Small Entity</b>              |                       |
| <b>Fee Description</b>  |                    |                     |                    |   |                         | <b>Fee (\$)</b>                  | <b>Fee (\$)</b>       |
| Each claim over 20 (including Reissues)   |                    |                     |                    |   |                         | 52                               | 26                    |
| Each independent claim over 3 (including Reissues)  |                    |                     |                    |   |                         | 220                              | 110                   |
| Multiple dependent claims   |                    |                     |                    |   |                         | 390                              | 195                   |
| <b>Total Claims</b>   |                    |                     |                    |   |                         | <b>Multiple Dependent Claims</b> |                       |
| <b>Extra Claims</b>   |                    |                     |                    |   |                         | <b>Fee (\$)</b>                  | <b>Fee Paid (\$)</b>  |
| _____ - 20 or HP = _____ x _____ = _____  |                    |                     |                    |   |                         | _____                            | _____                 |
| HP = highest number of total claims paid for, if greater than 20  |                    |                     |                    |   |                         |                                  |                       |
| <b>Indep. Claims</b>  |                    |                     |                    |   |                         | <b>Fee (\$)</b>                  | <b>Fee Paid (\$)</b>  |
| _____ - 3 or HP = _____ x _____ = _____   |                    |                     |                    |   |                         | _____                            | _____                 |
| HP = highest number of independent claims paid for, if greater than 3   |                    |                     |                    |   |                         |                                  |                       |
| <b>3. APPLICATION SIZE FEE</b>  |                    |                     |                    |   |                         |                                  |                       |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |                    |                     |                    |   |                         |                                  |                       |
| <b>Total Sheets</b>   |                    | <b>Extra Sheets</b> |                    | <b>Number of each additional 50 or fraction thereof</b> |                         | <b>Fee (\$)</b>                  | <b>Fee Paid (\$)</b>  |
| _____ - 100 = _____   |                    | _____ / 50 = _____  |                    | _____ (round up to a whole number) x _____              |                         | _____ = _____                    | _____                 |
| <b>4. Other Fee(s)</b>  |                    |                     |                    |   |                         |                                  |                       |
| Non-English Specification, \$130 fee (no small entity discount)   |                    |                     |                    |   |                         | <b>Fees Paid (\$)</b>            |                       |
| Other (e.g., late filing surcharge): <u>Extension of time (3 months)</u>  |                    |                     |                    |   |                         | <u>N/A</u>                       |                       |
| Other (e.g., late filing surcharge): _____  |                    |                     |                    |   |                         | <u>1110.00</u>                   |                       |

|                     |                          |                         |                        |
|---------------------|--------------------------|-------------------------|------------------------|
| <b>SUBMITTED BY</b> |                          |                         |                        |
| Signature           | /Marguerite E. Gerstner/ | Registration No. 32,695 | Telephone 650-361-2483 |
| Name (Print/Type)   | Marguerite E. Gerstner   | Date December 8, 2010   |                        |

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|---|-----------------------------|
| <b>Certificate of EFS-Web Transmission</b>  |                             |
| I hereby certify that this correspondence is being transmitted via the U.S. Patent and Trademark Office (USPTO) electronic filing system (EFS-Web) to the USPTO on December 8, 2010 |                             |
| Typed or printed name of person signing this certificate: Marguerite E. Gerstner  |                             |
| Signature: _____ /Marguerite E. Gerstner/   | Registration Number: 32,695 |